

Supplemental Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
<u>Application No.:</u>	<u>10/582,321</u>
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD OF MODIFYING PLANT PHENOTYPES WITH NONSYMBIOTIC HEMOGLOBIN
Attorney Docket Number::	049280-0102
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	3
Total Drawing Sheets::	6
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canadian
Status::	Full Capacity
Given Name::	Robert D.
Family Name::	Hill
City of Residence::	Winnipeg

State or Province of Manitoba
Residence::
Country of Residence:: Canada
Street of mailing address:: 34 McNulty Cres.
City of mailing address:: Winnipeg
State or Province of mailing address:: Manitoba
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: R2M 5H4

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Kevin
Family Name:: Baron
City of Residence:: Carberry
State or Province of Manitoba
Residence::
Country of Residence:: Canada
Street of mailing address:: Box 623
City of mailing address:: Carberry
State or Province of mailing address:: Manitoba
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: R0K 0H0

Correspondence Information

Correspondence Customer Number:: 22428
E-Mail address:: PTOMailWashington@foley.com

Representative Information

Representative Customer Number::	22428	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IB2004/004119	12/10/2004
<u>This Application</u>	<u>National Stage of</u>	<u>PCT/IB2004/004419</u>	<u>12/10/2004</u>
PCT/IB2004/004119	An application claiming the benefit under 35 USC 119(e)	60/528,777	12/12/2003

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information**Assignee Name::**

University of Manitoba